CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

PARTIDES COISPIEMS

RECEIVED

Date Received

Official Use Only

MAR 0 4 2011

ADMINISTRATION OFFICE.

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ΝA	ME OF FILER	(LAST)	(FIRST)	· (MIDDLE)
_		Borchard	Carla	L.
1.	Office, Agency, or Cou	ırt		
	Agency Name	<u> </u>		
	City of Morro Bay	•	·	·
	Division, Board, Department, D	istrict, if applicable	Your Position	
	City Council		Council Member	
	► If filing for multiple positions,	list below or on an attachment.		
	Agency:		Position:	
2.	Jurisdiction of Office	(Check at least one box)		
	∵ State		☐ Judge (Statewide Juris	ediction)
	Multi-County		County of	
	•	,		
_				
3.	Type of Statement (ch	-		
	Annual: The period cover 2010.	ed is January 1, 2010, through Decemb	per 31, Leaving Office: Date (Check one)	⇒ Left
	The period covered is _ 2010.	, through Decemb	er 31, O The period covere leaving office.	d is January 1, 2010, through the date of
	☐ Assuming Office: Date _		 The period covere of leaving office. 	ed is, through the date
	Candidate: Election Year	Office sought,	, if different than Part 1:	
4 .	Schedule Summary			
	Check applicable schedules of	or "None."	► Total number of pages includ	ing this cover page:4
	Schedule A-1 - Investment	s - schedule attached	Schedule C - Income, Loar	ns, & Business Positions - schedule attached
	Schedule A-2 - Investment	s - schedule attached	Schedule D - Income - Git	ts – schedule attached
	☐ Schedule B - Real Propert	y – schedule attached	Schedule E - Income - Gif	ts Travel Payments schedule attached
		-or-		
		None - No reportable	interests on any schedule	
1				
J				-
				J a
	herein and in any attached sche	edules is true and complete. I acknowle	edge this i	
	I certify under penalty of perjo	ury under the laws of the State of Ca	alifornia th	
	3/11	11		
	Date Signed(riflor	bl, day, year)	Signat	
_				

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Name Carla Borchard

FAIR POLITICAL PRACTICES COMMISSION

CALIFORNIA FORM

Do not attach brokerage or financial statements.

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Coast Bankcorp	Founders Bank
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Stock	Stock
FAIR MARKET VALUE	FAIR MARKET VALUE
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other
(Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership () Income Received of \$0 - \$499 () Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ / 10 / / 10	/ / 10 / _/ 10
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
INAME OF BUSINESS ENTITY	P INAME OF BOSINESS ENTITI
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other
(Describe)	(Describe)
Partnership Oncome Received of \$0 - \$499 Oncome Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//_10//_10	/ / 10 // 10
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
OFNEDAL PERCONOTION OF BUSINESS ACTIVITY	OFFICE A DESCRIPTION OF PURPLESS A SERVICE
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//_10	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
·	•
Comments:	

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION Name

Carla Borchard

▶ 1. BUSINESS ENTITY OR TRUST	▶ 1. BUSINESS ENTITY OR TRUST
Carla L. Borchard	
Name 660 Ponderosa Street, Morro Bay, CA	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one Trust, go to 2 Business Entity, complete the box, then go to 2	Check one ☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS АСТІVІТУ Restaurant - Food Service	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Cover \$1,000,000 STAPPLICABLE, LIST DATE: 1000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Sole Proprietorship Partnership Other YOUR BUSINESS POSITION OWNER	NATURE OF INVESTMENT Sole Proprietorship Partnership Other YOUR BUSINESS POSITION
▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
☐ \$0 - \$499	
▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet of necessary.)
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
☐ INVESTMENT ☐ REAL PROPERTY .	INVESTMENT REAL PROPERTY
Name of Business Entity <u>or</u> Street Address or Assessor's Parcel Number of Real Property	Name of Business Entity <u>or</u> Street Address or Assessor's Parcel Number of Real Property
Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 /10 /10 \$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2010/2011) Sch. A-2

SCHEDULE C Income, Loans, & Business Positions (Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION				
Name				
Carla Borchard				

▶ 1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
Carla's Country Kitchen	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
213 Beach Street, Morro Bay, CA	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Restaurant	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Owner/Manager	
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \qquad \qqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqq
☐ \$10,001 - \$100,000 🔀 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income	Salary Spouse's or registered domestic partner's income
Loan repayment Partnership	Loan repayment Partnership
☐ Sale of	Sale of
Sale of(Property, car, boat, etc.)	Sale of(Property, car, boat, etc.)
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
Other(Describe)	Other(Describe)
1	
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERI	OD
	lending institutions, or any indebtedness created as part
of a retail installment or credit card transaction, made	
available to members of the public without regard to y	
not in a lender's regular course of business must be of	disclosed as follows:
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
	м. П. И.
ADDRESS (Business Address Acceptable)	%
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	SECURITY FOR LOAN None Personal residence
BUSINESS ACTIVITY, IF ANY, OF LENDER	□ None □ Personal residence
BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD	
	None Personal residence Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	None Personal residence Real Property Street address City
HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000	None Personal residence Real Property
HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000	None Personal residence Real Property Street address City Guarantor
HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000	None Personal residence Real Property Street address City
HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000	None Personal residence Real Property Street address City Other
HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000	None Personal residence Real Property Street address City Other